

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Trust G</i>		<i>08-30-01</i>
O.I.P.E. CLASSIFIER		<i>12</i>	<i>9/12</i>
FORMALITY REVIEW	<i>SL</i>	<i>JJJ</i>	<i>10/11/01</i>
RESPONSE FORMALITY REVIEW	<i>RL</i>	<i>1080</i>	<i>3/29/02</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	<i>11/6/01</i>
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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*830*  
*10/1/01*  
*10/1/01*  
*10/1/01*